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Congresswoman Matsui Voices Opposition to Cuts to Primary Care Workforce

H.R. 1216 Would Remove Federal Funding to Help Train 16,000 Family Doctors Included in Health Care Law

WASHINGTON, D.C. – Today, Congresswoman Doris Matsui (D-Sacramento) voted against H.R. 1216, which would put the future of the primary care workforce into question by removing designated funding to support medical students interested in pursuing a career as a family doctor.

The Affordable Care Act included critical funding designed to increase the size of the health care workforce and specifically to increase the number of general practice and primary care physicians. H.R. 1216 would undermine the Teaching Health Centers Graduate Medical Education (GME) Program included in the health care law, which would make the critical investments in our nation's health care workforce in order to fill the projected shortages.

Congresswoman Matsui spoke in opposition to H.R. 1216 on the House floor Tuesday saying, "Primary care has long been neglected in our country, and it has been well-documented that our country faces a looming shortage of primary care providers. The Affordable Care Act will help train and develop 16,000 new primary care providers. That means 16,000 more primary care doctors to help keep our children and families healthy, as studies strongly associate healthier outcomes with regular access to care.

"If H.R. 1216 were enacted, we would no longer have the pipeline of primary care providers to meet demand," Matsui continued. "This would perpetuate the onset of chronic conditions such as heart diseases, diabetes, and cancer. Simply put: limiting funding to help increase our nation's primary care workforce will increase costs and cost lives."

The Affordable Care Act provides about \$230 million in mandatory appropriations for this Teaching Health Centers Graduate Medical Education (GME) Program. But H.R. 1216 would rescind the unobligated portion of this spending. Instead, it authorizes a total of \$184 million in discretionary appropriations. CBO estimates the rescission saves \$220 million over 10 years; if the authorization is fully appropriated, this would be offset by \$184 million in discretionary spending – with a net savings of \$36 million.

Moreover, without guaranteed funding, this program will likely not ever get off the ground. Training a single resident involves at least a three-year commitment, and it takes even more time for an institution to build the infrastructure necessary to support residency training.

Congresswoman Matsui met recently with local medical students at UC Davis, and heard firsthand the benefits the GME program can make in helping to encourage more students to peruse a career in primary care. “The importance of the life-saving diagnosis primary care providers generate huge cost-savings for everyone involved – the patient first and foremost, but also their insurance provider and our nation’s health care system as a whole,” Matsui added. “We must invest in our nation’s primary care system if we are going to meet demand. Ensuring access to high-quality health care includes ensuring that Americans can see their family doctor in an appropriate amount of time. H.R. 1216 would take our health system backwards at the expense of American families.”

H.R. 1216 is opposed by such groups as the American Academy of Family Physicians, American National Association of Community Health Centers, the Association of American Medical Colleges, and the Primary Care Research Group.

To see video footage of Congresswoman Matsui speaking today on the House floor against H.R. 1216, please click [HERE](#) .

For more information about the Congresswoman’s work on health care, please visit www.matsui.house.gov/healthcare

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